

IOWA BOARD OF NURSING

In RE: Reconsideration of)	Declaratory Ruling No. 36
Declaratory Ruling No. 32)	
)	RNs Administering IV Versed

Petitions for reconsideration of Declaratory Ruling No. 32 were filed with the Iowa Board of Nursing by Linda Fennelly, R.N., Director, Medical/Surgical Nursing, St. Luke's Hospital, Davenport, Iowa and Peg A. Mehmert, R.N., Assistant Director: Nursing Systems and Research, Mercy Hospital, Davenport, Iowa on January 4, 1989 and December 14, 1988.

Based on information received by the Board, Declaratory Ruling No. 32 is rescinded and this ruling is substituted in its place.

Questions presented in the original petition were:

1. In the acute and skilled care units of St. Luke's Hospital, Davenport, Iowa, may registered nurses administer Versed via continuous intravenous drip and/or by intravenous push under the written order of a physician?
2. May registered nurses employed by St. Luke's Home Care administer intravenous Versed via continuous drip and/or by intravenous push to a terminally ill patient once the patient is stabilized in the hospital setting and the medication is used as adjuvant therapy along with a narcotic for pain control?
3. If registered nurses are not permitted to administer intravenous Versed, may they:
 - a. Teach the patient or significant other to self administer?
 - b. When a change in prescription occurs, go to the patient's home and adjust the pump setting of the infusion control device?

The questions presented in the request for reconsideration are:

1. May a registered nurse employed at Mercy Hospital or St. Luke's Hospital in Davenport, Iowa, administer the first dose of IV Versed and titrate the dose on the order of a physician?
2. May a registered nurse administer IV Versed via a continuous drip to any patient, regardless of whether a patient is terminally ill, on the order of a physician?
3. Does a patient require continuous monitoring while receiving IV Versed?

The Board is authorized to issue declaratory rulings "as to the applicability of any statutory provision, rule or other written statement of law or policy, decision, or order of the agency" pursuant to Iowa Code § 17A.9 (1987). See also Iowa Administrative Code, Nursing Board [655], Chapter 9.

The facts leading to the original request were as follows:

A terminally ill patient at St. Luke's Hospital in Davenport, Iowa was receiving high dose narcotics to control his pain. His use of narcotics diminished significantly when the narcotics were administered intrathecally along with IV Versed on a continuous drip.

The facts leading to the request for reconsideration include:

It was the intention of St. Luke's Hospital that registered nurses be permitted to administer IV Versed via continuous drip to any patient on an acute or skilled nursing unit as ordered by the physician, and not limit administration to only terminally ill patients.

A Versed drip may be ordered at any time as an adjunct to pain control and a physician will not always be available to administer an initial dose or be able to remain with a patient for several hours while the dose is titrated.

Continuous monitoring of a patient receiving IV Versed presents an ethical dilemma for those terminally ill patients who have "do not resuscitate orders."

Registered nurses in the Endoscopy Suite at Mercy Hospital had been administering the initial and subsequent doses of IV push Versed on the order of a physician.

Nursing responsibilities in delivering home and hospital care would include:

1. patient assessment
2. patient education, drug administration, care of access device, operating the pump, self monitoring, and observing for side effects.
3. administering the medication and/or teaching pharmacological action, dosage range, side effects and clinical monitoring.
4. ongoing patient monitoring via regularly scheduled and "on call" home visits
5. catheter site care
6. operation of the infusion device (set up and reprogramming)
7. emergency procedures related to the central venous access device dislodgement or drug related adverse reactions.

Versed (midazolam hydrochloride) is a short-acting benzodiazepine central nervous system depressant. The following warning is printed in the Roche Laboratories guidelines:

Versed must never be used without individualization of dosage. Prior to the intravenous administration of Versed in any dose, the immediate availability of oxygen, resuscitative equipment and skilled personnel for the maintenance

of a patent airway and support of ventilation should be ensured. Patients should be continuously monitored for early signs of underventilation or apnea, which can lead to hypoxia/cardiac arrest unless effective counter measures are taken immediately.

The Board of Nursing considers the administration of intravenous Versed to a patient via continuous drip and/or intravenous push to be within the scope of practice of a registered nurse in an acute and skilled care unit of St. Luke's Hospital and Mercy Hospital, Davenport, Iowa and not within the scope of practice of a registered nurse in a home care setting. The registered nurse may teach the patient and family members self administration and pump setting adjustment in a home setting. The registered nurse employed in a home setting may not adjust the pump setting of the infusion control device.

Rationale

Iowa Administrative Code, Nursing Board [655], § 6.2(5) states in part:

The registered nurse shall recognize and understand the legal implications of accountability. Accountability includes but need not be limited to the following:

a. Performing or supervising those activities and functions which require the knowledge and skill level currently ascribed to the registered nurse and seeking assistance when activities and functions are beyond the licensee's scope of preparation.

The registered nurse in an acute and skilled care unit of St. Luke's Hospital or Mercy Hospital, Davenport, Iowa, has immediate availability of oxygen, resuscitative equipment and skilled personnel for maintenance of a patent airway and support of ventilation. This is not available in a home setting and therefore the nurse can not assure safe delivery of nursing care. If the patient is willing to assume the risk of self

administration of the medication then the registered nurse may teach those skills to the patient and family members.

In an acute and skilled care unit of St. Luke's Hospital and Mercy Hospital, the registered nurse may administer intravenous Versed via continuous drip and/or intravenous push if the following conditions are met:

1. initial administration and titration of medication may be performed by a registered nurse on the order of a physician;

2. there must be immediate availability of oxygen, resuscitative equipment and skilled personnel for the maintenance of a patent airway;

3. the patient will be monitored for signs of underventilation or apnea;

4. the institution has a written policy identifying that the procedure is acceptable practice for the registered nurse in the facility; and

5. the procedure has been prescribed by the physician by a written order.

Reference

Versed Dosage and Administration Guidelines, Roche Laboratories, April, 1988.

Consultants

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March 3, 1989
Date

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